2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2006 8:00 am Secretary of State **DOCUMENT #830170** 05-01-2006 90415 029 ***150.00 1. Entity Name THE UNITED METHODIST PUBLISHING HOUSE, INC. Principal Place of Business Mailing Address 40076496 201 EIGHTH AVENUE SOUTH 201 EIGHTH AVENUE SOUTH NASHVILLE, TN 37203-3919 NASHVILLE, TN 37203-3919 04122006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 62-0535345 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent THOMAS, GARY A. DO NOT WRITE 2781 GULF TO BAY BLVD. CLEARWATER, FL 34619 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE ALEXANDER, NEIL M NAME STREET ADDRESS 201 EIGHTH AVENUE SOUTH NASHVILLE, TN 372033919 CITY-ST-ZIP TITLE TONEY, CAROL NAME P.O. BOX 6654 STREET ADDRESS CITY-ST-ZIP HUNTSVILLE, AL 35824 TITLE WALLACE, LARRY NAME STREET ADDRESS 201 EIGHTH AVENUE SO. DO NOT WRITE NASHVILLE, TN CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the received changed, or on an attachment

SIGNATURE:

TITLE NAME STREET ADDRESS

TED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/06

615-749-6215

Daytime Phone #

FILED